



CitizenLink

# FEDERAL TAX FORM 990

Fiscal Year Ending September 30, 2011

TRANSFORMING CULTURE THROUGH BIBLICAL CITIZENSHIP



A FOCUS ON THE FAMILY AFFILIATE

Form **990**

# Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047

**2010**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

**A** For the 2010 calendar year, or tax year beginning **OCT 1, 2010** and ending **SEP 30, 2011**

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <div style="border: 1px solid black; padding: 2px;"><b>CITIZENLINK</b></div> Doing Business As <div style="border: 1px solid black; padding: 2px;">Number and street (or P.O. box if mail is not delivered to street address) Room/suite</div> <div style="border: 1px solid black; padding: 2px;"><b>8655 EXPLORER DRIVE</b></div> City or town, state or country, and ZIP + 4 <div style="border: 1px solid black; padding: 2px;"><b>COLORADO SPRINGS, CO 80920</b></div> <b>F</b> Name and address of principal officer: <b>DANIEL R MELLEMA</b> <b>SAME AS C ABOVE</b>	<b>D</b> Employer identification number <div style="border: 1px solid black; padding: 2px; text-align: center;"><b>20-0960855</b></div> <b>E</b> Telephone number <div style="border: 1px solid black; padding: 2px; text-align: center;"><b>866-655-4545</b></div> <b>G</b> Gross receipts \$ <b>6,973,904.</b> <b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c)</b> Group exemption number ▶
<b>I</b> Tax-exempt status: <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) ( <b>4</b> ) ◀ (Insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 <b>J</b> Website: ▶ <b>WWW.CITIZENLINK.COM</b>		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶ <b>L</b> Year of formation: <b>2004</b> <b>M</b> State of legal domicile: <b>CO</b>		

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>PROVIDING AN EDUCATIONAL SERVICE TOWARD THE END OF STRENGTHENING THE FAMILY IN ITS VARIED DIMENSIONS.</b> <b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. <b>3</b> Number of voting members of the governing body (Part VI, line 1a) ..... <b>3</b> ..... <b>12</b> <b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) ..... <b>4</b> ..... <b>10</b> <b>5</b> Total number of individuals employed in calendar year 2010 (Part V, line 2a) ..... <b>5</b> ..... <b>51</b> <b>6</b> Total number of volunteers (estimate if necessary) ..... <b>6</b> ..... <b>11</b> <b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12 ..... <b>7a</b> ..... <b>0.</b> <b>b</b> Net unrelated business taxable income from Form 990-T, line 34 ..... <b>7b</b> ..... <b>0.</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h) ..... <b>Prior Year</b> ..... <b>5,067,747.</b> <b>Current Year</b> ..... <b>3,401,077.</b> <b>9</b> Program service revenue (Part VIII, line 2g) ..... <b>0.</b> <b>0.</b> <b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) ..... <b>9,426.</b> <b>3,226.</b> <b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) ..... <b>4,176,881.</b> <b>3,552,802.</b> <b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) ..... <b>9,254,054.</b> <b>6,957,105.</b>	
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3) ..... <b>2,443,591.</b> <b>988,350.</b> <b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) ..... <b>0.</b> <b>0.</b> <b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) ..... <b>4,367,258.</b> <b>4,235,724.</b> <b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) ..... <b>0.</b> <b>4,924.</b> <b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>382,810.</b> <b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) ..... <b>4,033,195.</b> <b>3,074,988.</b> <b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) ..... <b>10,844,044.</b> <b>8,303,986.</b> <b>19</b> Revenue less expenses. Subtract line 18 from line 12 ..... <b>&lt;1,589,990.&gt;</b> <b>&lt;1,346,881.&gt;</b>	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16) ..... <b>Beginning of Current Year</b> ..... <b>2,705,949.</b> <b>End of Year</b> ..... <b>797,740.</b> <b>21</b> Total liabilities (Part X, line 26) ..... <b>1,046,063.</b> <b>484,735.</b> <b>22</b> Net assets or fund balances. Subtract line 21 from line 20 ..... <b>1,659,886.</b> <b>313,005.</b>	

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>   <b>Paid Preparer Use Only</b>	Signature of officer  <b>DANIEL R MELLEMA, TREASURER/CFO</b> Type or print name and title  Print/Type preparer's name <b>DAVE MOJA</b> Preparer's signature  Date <b>4-25-12</b> Check if self-employed <input type="checkbox"/> PTIN Firm's name ▶ <b>CAPIN CROUSE LLP</b> Firm's EIN ▶ Firm's address ▶ <b>972 EMERSON PKWY, STE A</b> <b>GREENWOOD, IN 46143</b> Phone no. <b>(317) 885-2620</b>	Date <b>4-30-12</b>
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May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

**Part III Statement of Program Service Accomplishments**Check if Schedule O contains a response to any question in this Part III ☒ **X****1** Briefly describe the organization's mission:**SEE SCHEDULE O****2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ **X** No

If "Yes," describe these new services on Schedule O.

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ **X** No

If "Yes," describe these changes on Schedule O.

**4** Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

**4a** (Code: ) (Expenses \$ 5,462,896. including grants of \$ 988,350.) (Revenue \$ )  
**PUBLIC POLICY - IN ADDITION TO RESEARCH AND COORDINATION WITH OTHER LIKE MINDED EXEMPT ORGANIZATIONS, CITIZENLINK COMMUNICATED INFORMATION CRITICAL TO THE STABILITY OF THE FAMILY ON POLICY AND LEGISLATIVE MATTERS VIA EMAIL, NEWSLETTER, AND PERIODICAL ARTICLES TO AS MANY AS 1 MILLION HOUSEHOLDS. THESE COMMUNICATIONS WERE DESIGNED TO RALLY CITIZENLINK MEMBERS AND THE GENERAL PUBLIC TO BE INVOLVED IN VARIOUS LEGISLATIVE MATTERS SUCH AS FEDERAL AND STATE CONSTITUTIONAL AMENDMENTS TO PROTECT MARRIAGE AS AN INSTITUTION BETWEEN ONE MAN AND ONE WOMAN, THE PROTECTION OF HUMAN LIFE IN ALL ITS VARIOUS FORMS, AND THE APPROPRIATE ROLE OF STATE AND FEDERAL JUDICIAL SYSTEMS AS DESIGNED BY THE FOUNDING FATHERS OF THE UNITED STATES OF AMERICA. IN ADDITION, CITIZENLINK EMPLOYEES ASSISTED FOCUS ON THE FAMILY (FOF) ON A NUMBER OF**

**4b** (Code: ) (Expenses \$ 1,351,144. including grants of \$ ) (Revenue \$ )  
**PUBLICATIONS - CITIZENLINK DISTRIBUTES DAILY AND ISSUE-RELATED EMAILS, LETTERS AND NEWSLETTERS. FOR EXAMPLE, THE CITIZENLINK EMAIL CONSISTS OF DAILY NEWS ITEMS ON A VARIETY OF TIMELY CULTURAL AND POLITICAL TOPICS, AND GOES OUT TO AS MANY AS 105 THOUSAND HOUSEHOLDS. CITIZENLINK REACHES MANY VARIED INTEREST GROUPS AND INDIVIDUALS THROUGH ITS PUBLICATIONS.**

**4c** (Code: ) (Expenses \$ 302,703. including grants of \$ ) (Revenue \$ )  
**BROADCASTS - CITIZENLINK AIRS VARIOUS RADIO PROGRAMS OVER CHANNELS DESIGNED TO REACH A FEW MILLION LISTENERS ON CRITICAL PUBLIC POLICY ISSUES AND INFORM LISTENERS HOW THEY CAN BECOME INVOLVED IN AFFECTING LEGISLATION IMPORTANT TO STRENGTHENING THE FAMILY AND PROVIDING A CULTURAL FOUNDATION WHERE THE GOSPEL OF JESUS CHRIST CAN BE SHARED AND ACCEPTED FREELY. CITIZENLINK ALSO AIRED MANY SHORT AND LONG RADIO DROP-INS RANGING FROM 30 SECONDS TO 30 MINUTES TO ALERT MEMBERS AND THE PUBLIC CONCERNING IMPORTANT LEGISLATIVE AND PUBLIC POLICY MATTERS.**

**4d** Other program services. (Describe in Schedule O.)(Expenses \$ 371,114. including grants of \$ ) (Revenue \$ )**4e Total program service expenses** **7,487,857.**

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>		X
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors?	X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	X	
<b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	X	
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
<b>9</b> Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
<b>10</b> Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
<b>b</b> Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
<b>c</b> Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
<b>d</b> Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
<b>f</b> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	X	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>	X	
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?		X
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
<b>20a</b> Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X
<b>b</b> If "Yes" to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)		

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**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>21</b> Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> .....	<b>21</b> X	
<b>22</b> Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....	<b>22</b>	X
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .....	<b>23</b> X	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i> .....	<b>24a</b>	X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....	<b>24b</b>	
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....	<b>24c</b>	
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....	<b>24d</b>	
<b>25a Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....	<b>25a</b>	X
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .....	<b>25b</b>	X
<b>26</b> Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> .....	<b>26</b>	X
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i> .....	<b>27</b>	X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28a</b>	X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28b</b> X	
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> .....	<b>28c</b>	X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....	<b>29</b>	X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....	<b>30</b>	X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....	<b>31</b>	X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....	<b>32</b>	X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....	<b>33</b>	X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> .....	<b>34</b> X	
<b>35</b> Is any related organization a controlled entity within the meaning of section 512(b)(13)? .....	<b>35</b>	X
<b>a</b> Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....	<b>36</b>	
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....	<b>37</b>	X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O .....	<b>38</b> X	

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**Part V Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response to any question in this Part V ☐

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	20	
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	51	
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
<b>b</b>	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>c</b>	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	X	
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	X	
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year		
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the organization make any taxable distributions under section 4966?		
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12		
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders		
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state?		
<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.			
<b>b</b>	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
<b>c</b>	Enter the amount of reserves on hand		
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?		X
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.Check if Schedule O contains a response to any question in this Part VI ☒ **X****Section A. Governing Body and Management**

	Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year <span style="float:right">1a 12</span>		
<b>b</b> Enter the number of voting members included in line 1a, above, who are independent <span style="float:right">1b 10</span>		
<b>2</b> Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		<b>X</b>
<b>3</b> Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		<b>X</b>
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		<b>X</b>
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?		<b>X</b>
<b>6</b> Does the organization have members or stockholders?	<b>X</b>	
<b>7a</b> Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		<b>X</b>
<b>b</b> Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		<b>X</b>
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b> The governing body?	<b>X</b>	
<b>b</b> Each committee with authority to act on behalf of the governing body?	<b>X</b>	
<b>9</b> Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		<b>X</b>

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
<b>10a</b> Does the organization have local chapters, branches, or affiliates?		<b>X</b>
<b>b</b> If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
<b>11a</b> Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	<b>X</b>	
<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b> Does the organization have a written conflict of interest policy? If "No," go to line 13	<b>X</b>	
<b>b</b> Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<b>X</b>	
<b>c</b> Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	<b>X</b>	
<b>13</b> Does the organization have a written whistleblower policy?	<b>X</b>	
<b>14</b> Does the organization have a written document retention and destruction policy?	<b>X</b>	
<b>15</b> Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
<b>a</b> The organization's CEO, Executive Director, or top management official	<b>X</b>	
<b>b</b> Other officers or key employees of the organization	<b>X</b>	
If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		
<b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		<b>X</b>
<b>b</b> If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed **AL, AK, AZ, FL, GA, HI, IL, KY, LA, MD, MN, NC**

**18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
☒ Own website ☐ Another's website ☒ Upon request

**19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

**20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **DANIEL R. MELLEMA - 866-655-4545**  
**8655 EXPLORER DRIVE, COLORADO SPRINGS, CO 80920**

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response to any question in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1 LTG PATRICK P. CARUANA (USAFA, RE CHAIRMAN/BOARD MEMBER	1.00	X		X				0.	0.	0.
2 DR. R. ALBERT MOHLER, JR. VICE CHAIRMAN/BOARD MEMBER	1.00	X		X				0.	0.	0.
3 JAMES D. DALY PRESIDENT/BOARD MEMBER	45.00	X		X				218,757.	0.	27,748.
4 ROBERT E. HAMBY C.P.A. BOARD MEMBER	2.00	X						0.	0.	0.
5 DANIEL VILLANUEVA BOARD MEMBER	1.00	X						0.	0.	0.
6 ELSA PRINCE BROEKHUIZEN BOARD MEMBER	1.00	X						0.	0.	0.
7 DR. KATHLEEN NIELSON BOARD MEMBER	1.00	X						0.	0.	0.
8 ERIC PILLMORE BOARD MEMBER	1.00	X						0.	0.	0.
9 LEE TORRENCE BOARD MEMBER	1.00	X						0.	0.	0.
10 PAUL NELSON BOARD MEMBER	1.00	X						0.	0.	0.
11 KIM ROBINSON BOARD MEMBER	1.00	X						0.	0.	0.
12 ANTHONY WAUTERLEK BOARD MEMBER	1.00	X						0.	0.	0.
13 STU MENDELSON SECRETARY	1.00			X				0.	0.	0.
14 DANIEL R. MELLEMA CFO/TREASURER	45.00			X				116,664.	0.	21,676.
15 CLARK MILLER CHIEF STRATEGY OFFICER	45.00				X			0.	163,053.	21,032.
16 ROBERT WOOD CHIEF INFORMATION OFFICER	45.00					X		0.	139,718.	18,744.
17 THOMAS A. MINNERY SENIOR VICE PRESIDENT	45.00					X		143,433.	0.	18,935.



**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
18 STANLEY R. JOHN SENIOR VICE PRESIDENT	45.00					X		0.	149,067.	21,940.
19 DAVE DICKINSON SENIOR VICE PRESIDENT	45.00					X		0.	155,275.	10,764.
20 TIM GOEGLEIN SENIOR VICE PRESIDENT	45.00					X		138,943.	0.	14,352.
21 WADE D. CROW FORMER CFO/TREASURER	0.00						X	184,016.	0.	14,654.
22 GLENN A. WILLIAMS FORMER COO	0.00						X	0.	192,554.	17,190.
<b>1b Sub-total</b> .....								801,813.	799,667.	187,035.
<b>c Total from continuation sheets to Part VII, Section A</b> .....								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b> .....								801,813.	799,667.	187,035.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **7**

	Yes	No
3 Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual .....	X	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual .....	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person .....		X

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. **NONE**

(A) Name and business address	(B) Description of services	(C) Compensation
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization <b>0</b>		

**Part VIII Statement of Revenue**

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<b>Contributions, gifts, grants and other similar amounts</b>	<b>1 a</b> Federated campaigns .....	<b>1a</b>					
	<b>b</b> Membership dues .....	<b>1b</b>	47,329.				
	<b>c</b> Fundraising events .....	<b>1c</b>					
	<b>d</b> Related organizations .....	<b>1d</b>					
	<b>e</b> Government grants (contributions) .....	<b>1e</b>					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above .....	<b>1f</b>	3353748.				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$ .....		16,800.				
	<b>h Total.</b> Add lines 1a-1f .....			3401077.			
<b>Program Service Revenue</b>			<b>Business Code</b>				
	<b>2 a</b> .....						
	<b>b</b> .....						
	<b>c</b> .....						
	<b>d</b> .....						
	<b>e</b> .....						
	<b>f</b> All other program service revenue .....						
<b>g Total.</b> Add lines 2a-2f .....							
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) .....			3,366.			3,366.
	<b>4</b> Income from investment of tax-exempt bond proceeds .....						
	<b>5</b> Royalties .....						
	<b>6 a</b> Gross Rents .....	(i) Real	(ii) Personal				
	<b>b</b> Less: rental expenses .....						
	<b>c</b> Rental income or (loss) .....						
	<b>d</b> Net rental income or (loss) .....						
	<b>7 a</b> Gross amount from sales of assets other than inventory .....	(i) Securities	(ii) Other				
	<b>b</b> Less: cost or other basis and sales expenses .....						
	<b>c</b> Gain or (loss) .....						
	<b>d</b> Net gain or (loss) .....			<140.>			<140.>
	<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 .....	<b>a</b>					
	<b>b</b> Less: direct expenses .....	<b>b</b>					
	<b>c</b> Net income or (loss) from fundraising events .....						
	<b>9 a</b> Gross income from gaming activities. See Part IV, line 19 .....	<b>a</b>					
	<b>b</b> Less: direct expenses .....	<b>b</b>					
	<b>c</b> Net income or (loss) from gaming activities .....						
<b>10 a</b> Gross sales of inventory, less returns and allowances .....	<b>a</b>						
<b>b</b> Less: cost of goods sold .....	<b>b</b>						
<b>c</b> Net income or (loss) from sales of inventory .....							
<b>Miscellaneous Revenue</b>			<b>Business Code</b>				
<b>11 a</b> REIMBURSEMENT FROM FOF .....		900099	3552802.	3552802.			
<b>b</b> .....							
<b>c</b> .....							
<b>d</b> All other revenue .....							
<b>e Total.</b> Add lines 11a-11d .....			3552802.				
<b>12 Total revenue.</b> See instructions. ....			6957105.	3552802.	0.	3,226.	

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 .....	985,671.	985,671.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22 .....	2,679.	2,679.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 .....				
4 Benefits paid to or for members .....				
5 Compensation of current officers, directors, trustees, and key employees .....	903,766.	870,562.	30,881.	2,323.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....	47,365.	45,417.	1,815.	133.
7 Other salaries and wages .....	2,544,442.	2,439,778.	97,498.	7,166.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) .....	34,637.	34,637.		
9 Other employee benefits .....	511,394.	509,479.	1,366.	549.
10 Payroll taxes .....	194,120.	145,576.	45,312.	3,232.
11 Fees for services (non-employees):				
a Management .....				
b Legal .....	37,282.	37,139.	143.	
c Accounting .....	23,350.		23,350.	
d Lobbying .....				
e Professional fundraising services. See Part IV, line 17 .....	4,924.			4,924.
f Investment management fees .....	35.		35.	
g Other .....	412,422.	225,932.	122,465.	64,025.
12 Advertising and promotion .....	236,109.	201,263.		34,846.
13 Office expenses .....	246,387.	234,535.	11,696.	156.
14 Information technology .....	94,617.	55,546.	39,049.	22.
15 Royalties .....				
16 Occupancy .....	308,592.	304,730.	843.	3,019.
17 Travel .....	215,150.	183,472.	30,817.	861.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings .....	12,986.	5,762.	6,559.	665.
20 Interest .....				
21 Payments to affiliates .....				
22 Depreciation, depletion, and amortization .....	1,941.	1,941.		
23 Insurance .....				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a <b>RADIO, TV &amp; FILM</b> .....	577,223.	473,032.	0.	104,191.
b <b>PRINTING &amp; PUBLICATIONS</b> .....	349,724.	268,797.		80,927.
c <b>PROJECT DEVELOPMENT</b> .....	280,505.	263,731.		16,774.
d <b>POSTAGE &amp; SHIPPING</b> .....	257,413.	196,501.	1,915.	58,997.
e .....				
f All other expenses .....	21,252.	1,677.	19,575.	
25 <b>Total functional expenses.</b> Add lines 1 through 24f .....	8,303,986.	7,487,857.	433,319.	382,810.
26 <b>Joint costs.</b> Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation .....	1,100,200.	737,884.	0.	362,316.

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1 Cash - non-interest-bearing .....	2,331,708.	1	756,353.
	2 Savings and temporary cash investments .....		2	
	3 Pledges and grants receivable, net .....		3	
	4 Accounts receivable, net .....	149,579.	4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) .....		6	
	7 Notes and loans receivable, net .....		7	
	8 Inventories for sale or use .....		8	
	9 Prepaid expenses and deferred charges .....	217,113.	9	35,779.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	10a 13,129.		
	b Less: accumulated depreciation .....	10b 7,521.	7,549.	10c 5,608.
	11 Investments - publicly traded securities .....		11	
	12 Investments - other securities. See Part IV, line 11 .....		12	
	13 Investments - program-related. See Part IV, line 11 .....		13	
	14 Intangible assets .....		14	
	15 Other assets. See Part IV, line 11 .....		15	
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	2,705,949.	16	797,740.	
<b>Liabilities</b>	17 Accounts payable and accrued expenses .....	1,046,063.	17	484,735.
	18 Grants payable .....		18	
	19 Deferred revenue .....		19	
	20 Tax-exempt bond liabilities .....		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D .....		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		22	
	23 Secured mortgages and notes payable to unrelated third parties .....		23	
	24 Unsecured notes and loans payable to unrelated third parties .....		24	
	25 Other liabilities. Complete Part X of Schedule D .....		25	
	26 <b>Total liabilities.</b> Add lines 17 through 25 .....	1,046,063.	26	484,735.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	27 Unrestricted net assets .....	1,659,886.	27	313,005.
	28 Temporarily restricted net assets .....		28	
	29 Permanently restricted net assets .....		29	
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	30 Capital stock or trust principal, or current funds .....		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund .....		31	
	32 Retained earnings, endowment, accumulated income, or other funds .....		32	
	33 <b>Total net assets or fund balances</b> .....	1,659,886.	33	313,005.
34 <b>Total liabilities and net assets/fund balances</b> .....	2,705,949.	34	797,740.	

Form 990 (2010)

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response to any question in this Part XI ☐

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	6,957,105.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	8,303,986.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	<1,346,881.>
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	1,659,886.
<b>5</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>5</b>	0.
<b>6</b>	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	<b>6</b>	313,005.

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response to any question in this Part XII ☒

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant?		X
<b>2b</b> Were the organization's financial statements audited by an independent accountant?	X	
<b>2c</b> If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
<b>d</b> If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input checked="" type="checkbox"/> Both consolidated and separate basis		
<b>3a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
<b>b</b> If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

Form 990 (2010)

**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

**2010**

Name of the organization

Employer identification number

CITIZENLINK

20-0960855

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)( 4 ) (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Name of organization <b>CITIZENLINK</b>	Employer identification number <b>20-0960855</b>
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**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$ 12,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2		\$ 6,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3		\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4		\$ 12,300.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5		\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6		\$ 5,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization <b>CITIZENLINK</b>	Employer identification number <b>20-0960855</b>
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**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>7</u>		\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>8</u>		\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>9</u>		\$ <u>7,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>10</u>		\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>11</u>		\$ <u>50,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>12</u>		\$ <u>30,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)



Name of organization <b>CITIZENLINK</b>	Employer identification number <b>20-0960855</b>
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**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
13		\$ 5,200.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
14		\$ 12,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
15		\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
16		\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
17		\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
18		\$ 5,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization <b>CITIZENLINK</b>	Employer identification number <b>20-0960855</b>
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**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
19		\$ 5,175.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
20		\$ 6,100.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
21		\$ 5,364.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
22		\$ 5,300.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
23		\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
24		\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)



Employer identification number

20-0960855

[illegible]

Name of organization	Employer identification number
CITIZENLINK	20-0960855

**Part III** Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

**SCHEDULE C**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

**2010**

Open to Public  
Inspection

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**  
▶ **See separate instructions.**

**If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then**

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

**If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then**

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

**If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35a (Proxy Tax), then**

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization <b>CITIZENLINK</b>	Employer identification number <b>20-0960855</b>
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**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ..... ▶ \$ **182,456.**
- 3 Volunteer hours .....

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ..... ▶ \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... ▶ \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ..... ☐ Yes ☐ No
- 4a Was a correction made? ..... ☐ Yes ☐ No
- b If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... ▶ \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... ▶ \$
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ..... ▶ \$
- 4 Did the filing organization file **Form 1120-POL** for this year? ..... ☒ Yes ☐ No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2010

LHA

**Part II-A** Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check ☐ if the filing organization belongs to an affiliated group.
- B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying) .....			
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....			
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) .....			
<b>d</b> Other exempt purpose expenditures .....			
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) .....			
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.			
<b>If the amount on line 1e, column (a) or (b) is:</b>	<b>The lobbying nontaxable amount is:</b>		
Not over \$500,000	20% of the amount on line 1e.		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
Over \$17,000,000	\$1,000,000.		
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) .....			
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- .....			
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- .....			
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....		<input type="checkbox"/> Yes	<input type="checkbox"/> No

**4-Year Averaging Period Under Section 501(h)**  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2010

**Part II-B** Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b)
	Yes	No	Amount
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
<b>a</b> Volunteers? .....			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..			
<b>c</b> Media advertisements? .....			
<b>d</b> Mailings to members, legislators, or the public? .....			
<b>e</b> Publications, or published or broadcast statements? .....			
<b>f</b> Grants to other organizations for lobbying purposes? .....			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? .....			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....			
<b>i</b> Other activities? If "Yes," describe in Part IV .....			
<b>j</b> Total. Add lines 1c through 1i .....			
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .....			
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912 .....			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? .....			

**Part III-A** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members? .....	<b>1</b> X	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....	<b>2</b>	X
<b>3</b> Did the organization agree to carryover lobbying and political expenditures from the prior year? .....	<b>3</b>	X

**Part III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."

<b>1</b> Dues, assessments and similar amounts from members .....	<b>1</b>	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year .....	<b>2a</b>	
<b>b</b> Carryover from last year .....	<b>2b</b>	
<b>c</b> Total .....	<b>2c</b>	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .....	<b>3</b>	
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? .....	<b>4</b>	
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions) .....	<b>5</b>	

**Part IV** Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

**PART I-A, LINE 1:**

CITIZENLINK WAS FORMED TO PROVIDE AN EDUCATIONAL SERVICE TO PARENTS AND OTHERS WHO ARE CONCERNED WITH HEALTHY FAMILY LIVING, TOWARD THE END OF STRENGTHENING THE FAMILY IN ITS VARIED DIMENSIONS. CITIZENLINK'S ACTIVITIES INCLUDE WEBCASTS, INFORMATIONAL VIDEOS POSTED TO THE WEBSITE, EMAILS TO MEMBERS, CONTACTS WITH LEGISLATORS AND CANDIDATES,



PERIODIC UPDATES VIA MAIL, AND RADIO BROADCASTS.

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

**SCHEDULE D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

▶ **Complete if the organization answered "Yes," to Form 990,  
Part IV, line 6, 7, 8, 9, 10, 11, or 12.**

▶ **Attach to Form 990. ▶ See separate instructions.**

OMB No. 1545-0047

**2010**

**Open to Public  
Inspection**

**Name of the organization**

CITIZENLINK

**Employer identification number**

20-0960855

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate contributions to (during year) .....		
3 Aggregate grants from (during year) .....		
4 Aggregate value at end of year .....		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <input type="checkbox"/> Yes <input type="checkbox"/> No		

**Part II Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ .....

4 Number of states where property subject to conservation easement is located ▶ .....

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ .....

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ .....

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 .....	▶ \$ .....
(ii) Assets included in Form 990, Part X .....	▶ \$ .....

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 .....	▶ \$ .....
b Assets included in Form 990, Part X .....	▶ \$ .....

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a ☐ Public exhibition  
 b ☐ Scholarly research  
 c ☐ Preservation for future generations  
 d ☐ Loan or exchange programs  
 e ☐ Other \_\_\_\_\_

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV.

**Part V Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ► \_\_\_\_\_ %  
 b Permanent endowment ► \_\_\_\_\_ %  
 c Term endowment ► \_\_\_\_\_ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations  
 (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? \_\_\_\_\_

4 Describe in Part XIV the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		13,129.	7,521.	5,608.
e Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				5,608.

Schedule D (Form 990) 2010

**Part VII Investments - Other Securities.** See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives .....		
(2) Closely-held equity interests .....		
(3) Other .....		
(A) .....		
(B) .....		
(C) .....		
(D) .....		
(E) .....		
(F) .....		
(G) .....		
(H) .....		
(I) .....		
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶		

**Part VIII Investments - Program Related.** See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) .....		
(2) .....		
(3) .....		
(4) .....		
(5) .....		
(6) .....		
(7) .....		
(8) .....		
(9) .....		
(10) .....		
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

**Part IX Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) .....	
(2) .....	
(3) .....	
(4) .....	
(5) .....	
(6) .....	
(7) .....	
(8) .....	
(9) .....	
(10) .....	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	

**Part X Other Liabilities.** See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2) .....	
(3) .....	
(4) .....	
(5) .....	
(6) .....	
(7) .....	
(8) .....	
(9) .....	
(10) .....	
(11) .....	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

**Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements**

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	6,957,105.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	8,303,986.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	<1,346,881.>
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	0.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	<1,346,881.>

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1	Total revenue, gains, and other support per audited financial statements	1	6,957,105.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	6,957,105.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	6,957,105.

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1	Total expenses and losses per audited financial statements	1	8,303,986.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	8,303,986.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	8,303,986.

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

**PART X, LINE 2: AS OF SEPTEMBER 30, 2011, CITIZENLINK HAD NO UNCERTAIN**

**TAX POSITIONS THAT QUALIFY FOR RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS.**

**SCHEDULE I  
(Form 990)**Department of the Treasury  
Internal Revenue Service**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States****Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.****▶ Attach to Form 990.**

OMB No. 1545-0047

**2010****Open to Public  
Inspection**

Name of the organization

**CITIZENLINK****Employer identification number****20-0960855****Part I General Information on Grants and Assistance****1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ **Yes** ☐ **No****2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ☐ **▶**

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
ALASKA FAMILY ACTION P.O. BOX 231425 ANCHORAGE, AK 99523	20-5158717	501(C)(4)	50,000.	0.			RETENTION VOTE FOR COURT
AMERICANS FOR PROSPERITY 2111 WILSON BLVD, STE 350 ARLINGTON, VA 22201	75-3148958	501(C)(4)	12,000.	0.			ADVERTISING SUPPORT
CALIFORNIA FAMILY COUNCIL FOUNDATION - P.O. BOX 20012 - RIVERSIDE, CA 92516	16-1667739	501(C)(3)	75,000.	0.			ASSIST WITH PROP 8 LEGAL DEFENSE
CENTER FOR MILITARY READINESS P.O. BOX 51600 LIVONIA, MI 48151	38-3043093	501(C)(3)	8,000.	0.			ASSIST IN ONGOING RESEARCH EFFORTS.
CITIZENS FOR COMMUNITY VALUES 11175 READING RD, STE 103 CINCINNATI, OH 45241	31-1075684	501(C)(3)	10,000.	0.			ASSIST WITH DEFENSE EFFORTS
COLORADO FAMILY ACTION P.O. BOX 558 CASTLE ROCK, CO 80104	20-5012920	501(C)(4)	49,928.	4,074.	BOOK	INTERNET SERVICE ASSISTANCE & POSTAGE FOR A MAILING.	ASSIST WITH WEBSITE AND POSTAGE FOR A MAILING.

**2** Enter total number of section 501(c)(3) and government organizations **▶ 10.****3** Enter total number of other organizations **▶ 13.**

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2010)

**SEE PART IV FOR COLUMN (G) DESCRIPTIONS**

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CORNERSTONE ACTION P.O. BOX 4683 MANCHESTER, NH 03108	25-1914600	501(C)(4)	0.	6,099.	BOOK	INTERNET SERVICE ASSISTANCE	ASSIST WITH WEBSITE DEVELOPMENT
EXODUS INTERNATIONAL P.O. BOX 540119 ORLANDO, FL 32854	52-1413470	501(C)(3)	20,000.	0.			ASSIST WITH POSTAGE FOR EVENT PROMOTION.
FAITH AND ACTION 109 2ND STREET NE WASHINGTON, DC 20002	22-2443279	501(C)(4)	13,200.	0.			SUPPORT FOR EVANGELISTIC OUTREACH.
FAMILY ACTION OF TENNESSEE 2000 MALLORY LN, STE 130-167 FRANKLIN, TN 37067	20-4998740	501(C)(4)	0.	8,942.	BOOK	INTERNET SERVICE ASSISTANCE	ASSIST WITH WEBSITE
FAMILY POLICY INSTITUTE OF WASHINGTON - 16108 ASH WAY, STE 111A - LYNNWOOD, WA 98087	20-8438828	501(C)(3)	0.	10,320.	BOOK	INTERNET SERVICE ASSISTANCE & POSTAGE FOR A MAILING.	ASSIST WITH WEBSITE DEVELOPMENT AND POSTAGE FOR A MAILING.
FAMILY TALK P.O. BOX 51010 COLORADO SPRINGS, CO 80949	27-1394708	501(C)(3)	250,000.	0.			ASSIST WITH START-UP EFFORTS.
FLORIDA FAMILY POLICY COUNCIL 4853 S ORANGE AVE, STE C ORLANDO, FL 32806	52-2436800	501(C)(3)	0.	10,944.	BOOK	INTERNET SERVICE ASSISTANCE & POSTAGE FOR A MAILING.	ASSIST WITH WEBSITE AND POSTAGE FOR A MAILING.
FPIW ACTION 16108 ASH WAY, STE 111A LYNNWOOD, WA 98087	20-8438949	501(C)(4)	25,000.	1,542.	BOOK	INTERNET SERVICE ASSISTANCE	ASSIST WITH WEBSITE AND ELECTION OUTREACH EFFORTS.
INDIANA FAMILY ACTION 155 E MARKET, STE 307 INDIANAPOLIS, IN 46204	71-0998358	501(C)(4)	0.	57,685.	BOOK	INTERNET SERVICE ASSISTANCE, CONSULTING & POSTAGE FOR A	ASSIST WITH WEBSITE AND DISTRIBUTION OF VOTER GUIDES.

LHA

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
IOWA FAMILY POLICY CENTER ACTION 1100 N HICKORY BLVD, STE 107 PLEASANT HILL, IA 50327	42-1469051	501(C)(4)	25,380.	18,177.	BOOK	INTERNET SERVICE ASSISTANCE & POSTAGE FOR A MAILING.	ASSIST WITH WEBSITE AND VARIOUS STATE ELECTION EFFORTS.
LIBERTY INSTITUTE 2001 W PLANO PKWY, STE 1600 PLANO, TX 75075	75-1403169	501(C)(3)	0.	10,677.	BOOK	VOTER GUIDE PRINTING & POSTAGE	ASSIST WITH PRINTING AND POSTAGE.
NEW JERSEY FAMILY FIRST, INC. P.O. BOX 6011 PARSIPPANY, NJ 07054	20-8234453	501(C)(4)	5,000.	13,681.	BOOK	INTERNET SERVICE ASSISTANCE	ASSIST WITH WEBSITE DEVELOPMENT AND CAMPAIGN SEMINAR.
NORTH CAROLINA FPC P.O. BOX 20607 RALEIGH, NC 27609	56-1751596	501(C)(3)	7,647.	0.			ASSIST WITH POSTAGE FOR A MAILING.
PENNSYLVANIA FAMILY COUNCIL 23 N FRONT STREET HARRISBURG, PA 17101	25-1777977	501(C)(4)	0.	24,982.	BOOK	INTERNET SERVICE ASSISTANCE & POSTAGE FOR A MAILING.	ASSIST WITH WEBSITE AND POSTAGE FOR A MAILING.
PENNSYLVANIA FAMILY INSTITUTE 23 N FRONT STREET HARRISBURG, PA 17101	23-2569197	501(C)(3)	0.	15,296.	BOOK	VOTER GUIDE PRINTING & POSTAGE	VOTER GUIDE PRINTING AND POSTAGE
SUSAN B ANTHONY LIST 1800 N KENT ST, STE 1070 ARLINGTON, VA 22209	54-1850126	501(C)(4)	220,000.	0.			ASSIST WITH PURCHASE OF TV PROMOTIONAL SPOTS & ELECTION HELP.
WISCONSIN FAMILY ACTION P.O. BOX 1327 MADISON, WI 53701	83-0448717	501(C)(4)	0.	7,826.	BOOK	INTERNET SERVICE ASSISTANCE & POSTAGE FOR A MAILING.	ASSIST WITH WEBSITE DEVELOPMENT AND POSTAGE FOR A MAILING.



Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I, PART I, LINE 2: THESE REQUESTS FOR FINANCIAL ASSISTANCE ARE FOR

A SPECIFIC ACTIVITY THAT IS IN AGREEMENT WITH OUR ORGANIZATIONAL PURPOSE.

WE DISCUSS THE PROJECT INVOLVED AND HOW THE REQUESTED FUNDS ARE GOING TO BE

USED. WE ALSO MONITOR THE ACTIVITIES INVOLVED AND REQUEST FOLLOW-UP INFO

AS NECESSARY.

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest  
Compensated Employees

▶ **Complete if the organization answered "Yes" to Form 990,  
Part IV, line 23.**

▶ **Attach to Form 990.** ▶ **See separate instructions.**

OMB No. 1545-0047

**2010**

**Open to Public  
Inspection**

Name of the organization

**CITIZENLINK**

Employer identification number

**20-0960855**

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input checked="" type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence |
| <input checked="" type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees   |
| <input type="checkbox"/> Discretionary spending account                       | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain .....

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? .....

**3** Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee          | <input type="checkbox"/> Written employment contract                                |
| <input type="checkbox"/> Independent compensation consultant        | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment from the organization or a related organization? .....
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? .....
- c** Participate in, or receive payment from, an equity-based compensation arrangement? .....

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.**

**5** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" to line 5a or 5b, describe in Part III.

**6** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" to line 6a or 6b, describe in Part III.

**7** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III .....

**8** Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III .....

**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....

Yes No

1b X

2 X

4a X

4b X

4c X

5a X

5b X

6a X

6b X

7 X

8 X

9

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2010

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

**Note.** The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 JAMES D. DALY	(i)	214,290.	857.	3,610.	13,396.	15,366.	247,519.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
2 CLARK MILLER	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	159,479.	217.	3,357.	6,680.	15,366.	185,099.	0.
3 ROBERT WOOD	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	137,510.	217.	1,991.	4,392.	15,354.	159,464.	0.
4 THOMAS A. MINNERY	(i)	141,246.	217.	1,970.	8,831.	11,109.	163,373.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
5 STANLEY R. JOHN	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	146,010.	250.	2,807.	7,588.	15,362.	172,017.	0.
6 DAVE DICKINSON	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	153,827.	0.	1,448.	0.	11,502.	166,777.	0.
7 TIM GOEGLEIN	(i)	137,594.	1,349.	0.	0.	15,351.	154,294.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
8 WADE D. CROW	(i)	182,178.	0.	1,838.	5,086.	10,244.	199,346.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
9 GLENN A. WILLIAMS	(i)	0.	0.	0.	0.	0.	0.	0.
	(ii)	182,151.	0.	10,403.	7,622.	10,244.	210,420.	0.
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

Part III

Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

PART I, LINE 1A: JIM DALY HAS FLOWN FIRST-CLASS FOR INTERNATIONAL TRAVEL AND OCCASIONALLY FOR DOMESTIC FLIGHTS.

TRAVEL FOR COMPANIONS WAS PROVIDED TO JIM DALY. THE COST OF THE COMPANION TRAVEL IS INCLUDED IN EMPLOYEE COMPENSATION.

**SCHEDULE L**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Transactions With Interested Persons**

▶ **Complete if the organization answered**  
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,  
or Form 990-EZ, Part V, line 38a or 40b.  
▶ **Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.**

OMB No. 1545-0047

**2010**

**Open To Public  
Inspection**

Name of the organization

CITIZENLINK

Employer identification number  
20-0960855

**Part I Excess Benefit Transactions** (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

- 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ▶ \$
- 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$

**Part II Loans to and/or From Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No

Total ▶ \$

**Part III Grants or Assistance Benefiting Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2010

**Part IV Business Transactions Involving Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
JEREMY WOODARD	SON-IN-LAW OF DANIE	47,365.	JEREMY RECE		X

**Part V Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule L (see instructions).

**SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:**

(A) NAME OF PERSON: JEREMY WOODARD

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

SON-IN-LAW OF DANIEL VILLANUEVA, BOARD MEMBER

(C) AMOUNT OF TRANSACTION \$ 47,365.

(D) DESCRIPTION OF TRANSACTION: JEREMY RECEIVED WAGES RELATED TO HIS  
EMPLOYMENT AS A BUSINESS ANALYST FOR CITIZENLINK.

(E) SHARING OF ORGANIZATION REVENUES? = NO

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.  
▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

**2010**

Open to Public  
Inspection

Name of the organization

CITIZENLINK

Employer identification number

20-0960855

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

CITIZENLINK WAS ORGANIZED AS A RELIGIOUS CORPORATION ON APRIL 2, 2004

AND IS NOT ORGANIZED FOR THE PRIVATE GAIN OF ANY PERSON. IT IS

ORGANIZED UNDER THE COLORADO NONPROFIT CORPORATION ACT FOR RELIGIOUS

PURPOSES. CITIZENLINK WAS FORMED TO PROVIDE AN EDUCATIONAL SERVICE TO

PARENTS AND OTHERS WHO ARE CONCERNED WITH HEALTHY FAMILY LIVING, TOWARD

THE END OF STRENGTHENING THE FAMILY IN ITS VARIED DIMENSIONS. THE

PRIMARY MEANS OF ACCOMPLISHING THESE GOALS ARE RADIO BROADCASTS,

PERIODICAL ARTICLES, THE INTERNET AND EVENTS THAT SHARE THE MESSAGE

WITH MEMBERS, CHURCHES, AND THE PUBLIC AT LARGE IN THE UNITED STATES.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

RESEARCH PROJECTS AND COMMUNICATION TO CULTURE AND POLICY ISSUES.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

INTERNET - CITIZENLINK HAS DEVELOPED ONLINE RESOURCES TO DISCUSS

PRO-FAMILY LEGISLATION AND PROVIDE A MEANS FOR MEMBERS AND CONSTITUENTS

TO LEARN ABOUT CITIZENLINK ACTIVITIES AND EVENTS. THE CITIZENLINK

WEBSITE DRAWS A CONSISTENTLY GROWING AUDIENCE OF APPROXIMATELY 150

THOUSAND UNIQUE MONTHLY VISITORS. THE RESOURCES AVAILABLE INCLUDE WEB

VIDEOS, ANALYSIS OF ISSUES, AND ARCHIVES OF MEMBER NEWSLETTERS AND

EMAIL ALERTS TO MEMBERS. THIS WEBSITE HELPS PROMOTE A PLATFORM FOR

INFORMING, INSPIRING, AND RALLYING THOSE WHO CARE DEEPLY ABOUT THE

FAMILY TO GREATER INVOLVEMENT IN THE MORAL, CULTURAL, AND POLITICAL

ISSUES THAT THREATEN OUR NATION.

EXPENSES \$ 224,374. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2010)

032211  
01-24-11

Name of the organization CITIZENLINK	Employer identification number 20-0960855
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EVENTS - CITIZENLINK CO-SPONSORED A "VALUES VOTER SUMMIT" TO HELP PROMOTE PRO-FAMILY PARTICIPATION DURING THE COMING ELECTION SEASON. THIS EVENT FOCUSED ON ENCOURAGING CHRISTIANS TO VOTE IN ELECTIONS BASED ON THEIR CONSCIENCE AND THEIR VALUES.

EXPENSES \$ 80,986. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

CORRESPONDENCE - COMMUNICATIONS WITH MEMBERS AND OTHER INTERESTED PARTIES REGARDING QUESTIONS AND COMMENTS ON THE ACTIVITIES OF CITIZENLINK.

EXPENSES \$ 65,754. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 6: THE FIRST \$1.00 OF EACH INDIVIDUAL'S DONATION KEEPS THEIR MEMBERSHIP STATUS ACTIVE FOR ONE YEAR.

MEMBERSHIP IN CITIZENLINK PROVIDES INDIVIDUALS THE OPPORTUNITY TO PARTNER WITH A FAMILY ADVOCACY ORGANIZATION THAT INSPIRES MEN AND WOMEN TO LIVE OUT BIBLICAL CITIZENSHIP THAT TRANSFORMS CULTURE. THIS PARTNERSHIP HELPS CITIZENS UNDERSTAND AND PASSIONATELY ENGAGE IN POLICY ISSUES RELEVANT TO FAMILIES FROM A FOUNDATION FIRMLY ESTABLISHED IN A BIBLICAL WORLDVIEW.

FORM 990, PART VI, SECTION B, LINE 11: FORM 990 WAS REVIEWED IN DETAIL BY THE AUDIT/FINANCE COMMITTEE OF THE BOARD OF DIRECTORS. A COPY OF THE 990 WAS PROVIDED TO ALL BOARD MEMBERS BEFORE FILING.

FORM 990 WAS REVIEWED BY THE ORGANIZATION'S OUTSIDE CPA FIRM.

FORM 990, PART VI, SECTION B, LINE 12C: THE CONFLICT OF INTEREST POLICY IS



Name of the organization CITIZENLINK	Employer identification number 20-0960855
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REVIEWED ANNUALLY DURING A BOARD OF DIRECTORS MEETING. ANNUAL DISCLOSURE STATEMENTS ARE SIGNED BY DIRECTORS, OFFICERS AND ALL EMPLOYEES.

FORM 990, PART VI, SECTION B, LINE 15: THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS DETERMINES COMPENSATION OF THE ORGANIZATION'S CEO BY REVIEWING COMPARABLE DATA AND CONTEMPORANEOUS DOCUMENTATION. THE COMMITTEE ALSO ANNUALLY REVIEWS THE COMPENSATION OF OTHER OFFICERS AND KEY EMPLOYEES. THESE DELIBERATIONS AND DECISIONS REGARDING OFFICER COMPENSATION ARE DOCUMENTED ANNUALLY.

THE VOTING MEMBERS OF THIS COMMITTEE ARE INDEPENDENT DIRECTORS OF THE ORGANIZATION.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:  
AL, AK, AZ, FL, GA, HI, IL, KY, LA, MD, MN, NC, TN, UT, VA, WA, WV, WI

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS ORGANIZING DOCUMENTS AVAILABLE BY WRITTEN REQUEST. ALSO, THE ORGANIZATION MAKES IT'S FINANCIAL STATEMENTS AND FORMS 990 AVAILABLE ON IT'S WEBSITE.

FORM 990, PART XI, LINE 2C

AUDIT COMMITTEE OF THE BOARD OF DIRECTORS

THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS REVIEWS THE RESULTS OF THE ANNUAL FINANCIAL AUDIT. THE COMMITTEE OVERSEES THE SELECTION OF THE INDEPENDENT AUDITORS.

FORM 990, PART VII, SECTION A, LINE 1A, COLUMN B

Name of the organization <b>CITIZENLINK</b>	Employer identification number <b>20-0960855</b>
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**AVERAGE HOURS PER WEEK DEVOTED TO RELATED ORGANIZATIONS**

**AS EMPLOYEES OF A RELATED ORGANIZATION, THE FOLLOWING INDIVIDUALS**

**LISTED ON FORM 990, PART VII, SECTION A, LINE 1A DEVOTED AN AVERAGE OF  
45 HOURS PER WEEK TO THE RELATED ORGANIZATION:**

**GLENN A. WILLIAMS                  CLARK MILLER**

**STANLEY R. JOHN                  ROBERT WOOD**

**DAVE DICKINSON**

**LOBBYING/SOCIAL WELFARE ACTIVITIES**

**CITIZENLINK IS ACTIVE IN THE PROMOTION OF SOCIAL WELFARE BY ADDRESSING  
THE CHRISTIAN COMMUNITY AND THE CHRISTIAN'S RESPONSIBILITY IN THE  
PUBLIC POLICY ARENA, BOTH LOCALLY AND NATIONALLY. THE ORGANIZATION  
USES REGULAR MEDIA CHANNELS, SUCH AS RADIO, TELEVISION, PERIODICALS,  
THE INTERNET, AND EVENTS TO DISCUSS CRITICAL LEGISLATION AND POLICY  
MATTERS THAT SIGNIFICANTLY IMPACT CHRISTIAN WORLDVIEW ISSUES. THE  
ORGANIZATION IS ALSO USED AS A VEHICLE TO DISCUSS PRACTICAL MEANS FOR  
CHRISTIANS TO BECOME EDUCATED AND INVOLVED IN PUBLIC POLICY MATTERS.  
THE ORGANIZATION ENCOURAGES CHRISTIANS TO BE AWARE OF AND INVOLVED IN  
THEIR CIVIC DUTIES.**

**CITIZENLINK FOCUSES ON POLICY MATTERS SUCH AS: FEDERAL AND STATE  
CONSTITUTIONAL AMENDMENTS TO PROTECT MARRIAGE AS AN INSTITUTION BETWEEN  
ONE MAN AND ONE WOMAN, THE PROTECTION OF HUMAN LIFE IN ALL ITS VARIOUS  
FORMS, AND THE APPROPRIATE ROLE OF STATE AND FEDERAL JUDICIAL SYSTEMS  
AS DESIGNED BY THE FOUNDING FATHERS OF THE UNITED STATES OF AMERICA.**

**BROADCAST ACTIVITIES FOR FYE SEPTEMBER 30, 2010**

032212  
01-24-11

Name of the organization CITIZENLINK	Employer identification number 20-0960855
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JIM DALY AND OTHER CITIZENLINK EMPLOYEES USED RADIO AND TELEVISION TO EDUCATE AND DISCUSS CRITICAL LEGISLATIVE MATTERS (INCLUDING HOW LISTENERS AND VIEWERS CAN BECOME MORE ACTIVELY INVOLVED) IMPORTANT TO STRENGTHENING THE FAMILY AND PROVIDING A CULTURAL FOUNDATION WHERE THE GOSPEL OF JESUS CHRIST CAN BE SHARED AND ACCEPTED FREELY. SOME OF THESE BROADCASTS, PAID FOR AND PROVIDED BY CITIZENLINK, USED BROADCAST CHANNELS OF THE FOCUS ON THE FAMILY BROADCAST AND FAMILY NEWS IN FOCUS.

MAGAZINE & PERIODICAL ACTIVITIES FOR FYE SEPTEMBER 30, 2010

JIM DALY AND OTHER CITIZENLINK EMPLOYEES DEVELOPED AND ISSUED ARTICLES ON PRO-FAMILY LEGISLATION, INCLUDING HOW READERS CAN BECOME MORE INVOLVED. THESE ARTICLES WERE PAID FOR BY CITIZENLINK AND PROVIDED IN FOCUS ON THE FAMILY CITIZEN MAGAZINE, AS WELL AS OTHER AVAILABLE SOURCES.

WEBSITE (WWW.CITIZENLINK.COM) ACTIVITIES FOR FYE SEPTEMBER 30, 2010

THE CITIZENLINK WEBSITE PROVIDES A BIBLICAL PERSPECTIVE ON NATIONAL AND LOCAL NEWS AS WELL AS OFFERING TECHNIQUES FOR GRASSROOTS ACTIVISM. THE CITIZENLINK DAILY UPDATE E-MAIL, CREATED BY THE PUBLIC POLICY STAFF, OFFERS A CHRISTIAN PERSPECTIVE ON SIGNIFICANT CURRENT EVENTS AND LEGISLATION, AS WELL AS "ACTION ITEMS" THAT OFFER RESOURCES FOR FURTHER INVOLVEMENT.

RELIGIOUS/EDUCATIONAL/SOCIAL WELFARE SPECIFIC ACTIVITIES FOR FYE SEPTEMBER IN ADDITION TO ITS FOCUS ON POLICY MATTERS, AS A RELIGIOUS ORGANIZATION FORMED TO PROPAGATE THE GOSPEL OF JESUS CHRIST AND PROVIDE EDUCATIONAL SERVICES TO STRENGTHEN THE FAMILY.

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FOR THE FISCAL YEAR ENDING SEPTEMBER 30, 2011, CITIZENLINK EMPLOYEES  
WORKED IN ASSOCIATION WITH FOCUS ON THE FAMILY EMPLOYEES TO CONDUCT THE  
FOLLOWING PROGRAM SERVICES:

BROADCAST MINISTRIES

FOCUS ON THE FAMILY BROADCAST (WWW.FOCUSONTHEFAMILY.COM)

THE FOCUS ON THE FAMILY PROGRAM OFFERS REAL-LIFE, BIBLE BASED INSIGHTS  
FOR EVERYDAY FAMILIES. REAL HELP FOR MARRIAGE AND PARENTING FROM  
FAMILIES WHO ARE IN THE TRENCHES WITH YOU. HOSTED BY JIM DALY, DR.  
JULI SLATTERY AND JOHN FULLER.

THE VAST RADIO NETWORK CARRYING THE DAILY CITIZENLINK PROGRAM BROADCAST  
CONTINUES TO EXPAND IN THE NUMBER OF FACILITIES AND PROGRAMS OFFERED.  
EVERY WEEK IT IS AIRED ON OVER 2,643 FACILITIES (WHICH INCLUDE  
TERRESTRIAL STATIONS, THEIR TRANSLATORS, SATELLITE RADIO AND STREAMS)  
THROUGHOUT THE UNITED STATES WITH APPROXIMATELY 366 FACILITIES AROUND  
THE WORLD. FROM THE DAILY ENGLISH PROGRAM, A DAILY 15-MINUTE PROGRAM  
IS EXCERPTED, SCRIPTED AND THEN TRANSLATED INTO FRENCH, RUSSIAN, HINDI,  
TAMIL, TELUGU AND SPANISH, AIRING ON OVER 794 FACILITIES ACROSS EUROPE,  
THE COMMONWEALTH OF INDEPENDENT STATES (CIS), AND LATIN AMERICA. THIS  
DAILY BROADCAST IS OFFERED AS A RESOURCE ON AUDIO CD, PODCAST, MP3 OR  
ONLINE STREAMING AUDIO. THE DAILY FOCUS ON THE FAMILY PROGRAM IS ALSO  
AVAILABLE ON SALEM COMMUNICATIONS ONEPLACE.COM WEB SITE.

FAMILY NEWS IN FOCUS BROADCAST (WWW.CITIZENLINK.COM/FNIF)

BRINGING THE NATIONAL DIALOGUE TO YOUR KITCHEN TABLE CONVERSATIONS,

FAMILY NEWS IN FOCUS PROVIDES ANALYSIS ON HOW TODAY'S HEADLINES AFFECT

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YOUR FAMILY. HOSTED BY STUARD SHEPARD AND PRODUCED BY FOCUS ON THE FAMILY. THIS DAILY RADIO NEWS AND COMMENTARY PROGRAM INFORMS CITIZENS ABOUT CURRENT FAMILY-RELATED ISSUES, AND CHALLENGES THEM TO TAKE ACTION ON PRO-FAMILY MATTERS. APPROXIMATELY 2,075 FACILITIES CARRY THIS FEATURE, WHICH IS RELEASED IN A VARIETY OF FORMATS: TWO SEPARATE DAILY 60-SECOND VERSIONS, DAILY TWO-MINUTE OR FIVE-MINUTE VERSIONS, AND THREE WEEKLY VERSIONS: A 1-MINUTE, 2-MINUTE AND 5-MINUTE VERSIONS. NEWS SEGMENTS ARE ALSO POSTED DAILY ONLINE AND ARCHIVED FOR OVER SIX WEEKS.

#### ONLINE MINISTRIES

FOCUS ON THE FAMILY WEBSITE (WWW.FOCUSONTHEFAMILY.COM) THE FLAGSHIP WEB SITE FOR FOCUS ON THE FAMILY DRAWS AN AVERAGE OF MORE THAN 870,000 VISITORS PER MONTH, PROVIDING OUR CONSTITUENTS WITH READY ACCESS TO RELIABLE, PRACTICAL, TIME-TESTED ADVICE ON MARRIAGE, PARENTING, LIFE CHALLENGES AND MORE. THROUGH ONLINE ARTICLES, BLOGS, BROADCASTS, PODCASTS, STREAMING AUDIO/VIDEO AND COMMUNITY FORUMS, FOCUSONTHEFAMILY.COM OFFERS ENCOURAGEMENT, INSPIRATION AND HELP FOR PEOPLE OF ALL AGES. VISITORS CAN SEARCH ALL OF FOCUS ON THE FAMILY'S ONLINE CONTENT BY TOPIC, SITE OR MEDIA TYPE, FINDING THE INFORMATION THEY NEED WHENEVER THEY NEED IT.

#### GOVERNMENT AND PUBLIC POLICY

NOW MORE THAN EVER, WE AT CITIZENLINK RECOGNIZE THE NEED TO MAKE OUR VOICES HEARD IN THE PUBLIC SQUARE. PROTECTING LIFE, MARRIAGE AND RELIGIOUS LIBERTIES ARE AMONG THE FRONT BURNER ISSUES THAT IMPACT THE FAMILY. OUR GOVERNMENT AND PUBLIC POLICY OUTREACH ADDRESSES THESE ISSUES THROUGH A NUMBER OF VENUES. IN-HOUSE EXPERTS GRAPPLE WITH

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CONTEMPORARY SOCIAL ISSUES AND PRODUCE EDUCATIONAL AND MOTIVATIONAL RESOURCES FOR THE FOCUS AUDIENCE.

FAMILY NEWS IN FOCUS ONLINE ([WWW.CITIZENLINK.COM/CATEGORY/RADIO-NEWS/](http://WWW.CITIZENLINK.COM/CATEGORY/RADIO-NEWS/))  
THE FAMILY NEWS IN FOCUS (FNIF) WEBSITE CONTAINS ON-DEMAND AUDIO OF OUR RADIO REPORTS. THE DAILY RADIO NEWS AND COMMENTARY BROADCAST PROGRAM INFORMS CITIZENS ABOUT CURRENT EVENTS, AND CHALLENGES THEM TO TAKE ACTION ON PRO-FAMILY MATTERS. THEY ARE POSTED DAILY ONLINE.

ANALYSIS ([WWW.CITIZENLINK.COM/ANALYSIS/](http://WWW.CITIZENLINK.COM/ANALYSIS/))  
THIS WEB SITE SERVES TO BRING TIMELY, CRITICAL ANALYSIS TO BEAR ON THE MOST IMPORTANT CULTURAL AND POLICY ISSUES OF THE DAY. WRITTEN AND EDITED BY SOME OF THE COUNTRY'S MOST KNOWLEDGEABLE FAMILY ADVOCATES, THE RESOURCES FEATURED HERE ARE DESIGNED TO EDUCATE AND ENERGIZE CONCERNED CITIZENS WITHIN RELIGIOUS, POLITICAL, EDUCATIONAL AND ACTIVIST SPHERES WORKING TO APPLY CHRISTIAN PRINCIPLES TO THE SOCIAL ISSUES THAT FACE OUR NATION.

ONLINE VIDEO FEATURES ([WWW.CITIZENLINK.COM/VIDEO FEATURES](http://WWW.CITIZENLINK.COM/VIDEO FEATURES))  
ONLINE VIDEO COMMENTARY FEATURES ON CURRENT POLITICAL AND SOCIAL ISSUES DESIGNED TO PROVOKE THE VIEWER'S THOUGHT PROCESS.

CITIZENLINK PETITIONS ([WWW.CITIZENLINKPETITIONS.COM](http://WWW.CITIZENLINKPETITIONS.COM))  
THE CITIZENLINK PETITIONS WEBSITE EXISTS TO PROVIDE CONSTITUENTS AND OTHER CONCERNED CITIZENS A WAY TO EXPRESS THEIR OPINION ON SPECIFIC PIECES OF LEGISLATION OR CURRENT EVENTS BY WAY OF PETITIONS THAT ARE PRESENTED TO THE ELECTED REPRESENTATIVES.

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CITIZENLINK (WWW.CITIZENLINK.COM/)

THE CITIZENLINK WEBSITE PROVIDES A BIBLICAL PERSPECTIVE ON NATIONAL AND LOCAL NEWS AS WELL AS OFFERING TECHNIQUES FOR GRASSROOTS ACTIVISM. THE CITIZENLINK DAILY E-MAIL, CREATED BY THE PUBLIC POLICY STAFF, OFFERS A CHRISTIAN PERSPECTIVE ON SIGNIFICANT CURRENT EVENTS AND LEGISLATION, AS WELL AS "ACTION ITEMS" THAT OFFER RESOURCES FOR FURTHER INVOLVEMENT.

THE PARSONAGE (WWW.PARSONAGE.ORG)

THE WEBSITE WAS CREATED TO COME ALONGSIDE PASTORS AS THEY ENDEAVOR TO SERVE THE LORD IN THESE MOST DIFFICULT DAYS. THE MISSION IS TO FACILITATE SPIRITUAL RESTORATION AND RENEWAL FOR MINISTRY FAMILIES THROUGH RESOURCES AND SERVICES THAT WILL ASSIST IN BRINGING BALANCE TO THEIR PERSONAL AND PROFESSIONAL LIVES.

THE DRIVE-THRU BLOG (WWW.CITIZENLINKBLOG.COM/DRIVETHRU)

THIS BLOG SERVES TO BRING TIMELY, CRITICAL ANALYSIS TO BEAR ON THE MOST IMPORTANT CULTURAL AND POLICY ISSUES OF THE DAY. WRITTEN AND EDITED BY OUR PUBLIC POLICY ANALYSTS, THE RESOURCES FEATURED HERE ARE DESIGNED TO EDUCATE AND ENERGIZE CONCERNED CITIZENS WITHIN RELIGIOUS, POLITICAL, EDUCATIONAL AND ACTIVIST SPHERES WORKING TO APPLY CHRISTIAN PRINCIPLES TO THE STRUGGLES THAT FACE OUR NATION.

FOCUS VOTER (WWW.FOCUSVOTER.COM)

CITIZENLINK BELIEVES THAT VOTING IS BOTH A RIGHT AND A PRIVILEGE - THE BASIC FORM OF INVOLVEMENT IN OUR DEMOCRATIC SYSTEM OF GOVERNMENT. THIS WEBSITE HAS BEEN DESIGNED TO ALLOW VOTERS TO HELP DETERMINE WHO WILL LEAD OUR NATION, MAKE OUR LAWS AND PROTECT OUR LIBERTIES, AS WELL AS DIRECTLY DECIDE ON NUMEROUS BALLOT ISSUES.

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**PERIODICALS, NEWSLETTERS AND MEMBER UPDATE**

**FOCUS ON THE FAMILY CITIZEN MAGAZINE**

([HTTP://WWW.CITIZENLINK.COM/CITIZEN-MAGAZINE/](http://www.citizenlink.com/citizen-magazine/))

FOCUS ON THE FAMILY'S CITIZEN MAGAZINE IS A 32-PAGE, FOUR-COLOR, MONTHLY NEWSMAGAZINE IS ISSUED 10 TIMES A YEAR. CITIZEN OFFERS ITS READERS NEWS AND ANALYSIS ON CULTURAL, POLITICAL, AND PUBLIC POLICY ISSUES THAT DOMINATE THE HEADLINES OR ARE NOT SEEN IN THE MAINSTREAM MEDIA - ALL FROM A BIBLICAL WORLDVIEW. CITIZEN SEEKS TO INSPIRE AND EQUIP MEN AND WOMEN TO LIVE OUT BIBLICAL CITIZENSHIP WITHIN THEIR SPHERES OF INFLUENCE - WHETHER THAT'S IN THE BOARDROOM, SCHOOL ROOM, OR THE FAMILY ROOM.

**MEMBER UPDATES AND NEWSLETTERS**

JIM DALY, TOM MINNERY, AND OTHER CITIZENLINK EMPLOYEES DEVELOPED AND ISSUED MONTHLY NEWSLETTERS DURING THE FISCAL YEAR. THE NEWSLETTERS PRESENT NEWS ABOUT HOW A MEMBER'S GIFTS ARE HELPING TO DEFEND MORAL VALUES AND THE FAMILY. DURING THE YEAR, MEMBER UPDATES WERE SENT VIA E-MAIL TO 115,000 RECIPIENTS PER MONTH.

**PERSONAL TOUCH MINISTRIES**

STATE FAMILY POLICY COUNCILS ([WWW.CITIZENLINK.COM/STATE-GROUPS/](http://www.citizenlink.com/state-groups/))

SINCE 1988, BUSINESS AND COMMUNITY LEADERS FROM ACROSS THE NATION HAVE FORMED STATE-LEVEL ORGANIZATIONS TO INVEST IN THE FUTURE OF AMERICA'S FAMILIES. EACH FAMILY POLICY COUNCIL CONDUCTS POLICY ANALYSIS, PROMOTES RESPONSIBLE AND INFORMED CITIZENSHIP, FACILITATES STRATEGIC



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LEADERSHIP INVOLVEMENT, AND INFLUENCES PUBLIC OPINION. MANY OF THESE COUNCILS ALSO PERFORM COMMUNITY AND STATEWIDE WORK TO FOSTER A MOVEMENT TO AFFIRM FAMILIES. THESE COUNCILS ARE INDEPENDENT ENTITIES WITH NO CORPORATE OR FINANCIAL RELATIONSHIP TO EACH OTHER OR TO CITIZENLINK. HOWEVER, THEY HAVE A UNIFORM PURPOSE: SERVING AS A VOICE FOR THE FAMILY AND ASSISTING FAMILY ADVOCATES WHO AIM TO RECAPTURE THE MORAL AND INTELLECTUAL HIGH GROUND IN THE PUBLIC ARENA.

**Related Organizations and Unrelated Partnerships**

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.**  
▶ **Attach to Form 990.** ▶ **See separate instructions.**

OMB No. 1545-0047

**2010**  
**Open to Public**  
**Inspection**

Name of the organization

CITIZENLINK

**Employer identification number**  
**20-0960855**

**Part I Identification of Disregarded Entities** (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

**Part II Identification of Related Tax-Exempt Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
FOCUS ON THE FAMILY - 95-3188150	RELIGIOUS ORGANIZATION	COLORADO	501(C)(3)	PUBLIC CHARITY	NOT APPLICABLE		X
8605 EXPLORER DR							
COLORADO SPRINGS, CO 80920-1049							
REZILIENTKIDZ - 45-2158585	CHARITABLE, EDUCATIONAL & SCIENTIFIC ORGANIZATION	COLORADO	501(C)(3)	PUBLIC CHARITY	NOT APPLICABLE		X
8605 EXPLORER DR							
COLORADO SPRINGS, CO 80920-1049							

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2010

**Part III Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

[illegible]

**Part V Transactions With Related Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
<b>a</b> Receipt of <b>(i)</b> interest <b>(ii)</b> annuities <b>(iii)</b> royalties or <b>(iv)</b> rent from a controlled entity .....	<b>1a</b>	X
<b>b</b> Gift, grant, or capital contribution to other organization(s) .....	<b>1b</b>	X
<b>c</b> Gift, grant, or capital contribution from other organization(s) .....	<b>1c</b>	X
<b>d</b> Loans or loan guarantees to or for other organization(s) .....	<b>1d</b>	X
<b>e</b> Loans or loan guarantees by other organization(s) .....	<b>1e</b>	X
<b>f</b> Sale of assets to other organization(s) .....	<b>1f</b>	X
<b>g</b> Purchase of assets from other organization(s) .....	<b>1g</b>	X
<b>h</b> Exchange of assets .....	<b>1h</b>	X
<b>i</b> Lease of facilities, equipment, or other assets to other organization(s) .....	<b>1i</b>	X
<b>j</b> Lease of facilities, equipment, or other assets from other organization(s) .....	<b>1j</b>	X
<b>k</b> Performance of services or membership or fundraising solicitations for other organization(s) .....	<b>1k</b>	X
<b>l</b> Performance of services or membership or fundraising solicitations by other organization(s) .....	<b>1l</b>	X
<b>m</b> Sharing of facilities, equipment, mailing lists, or other assets .....	<b>1m</b>	X
<b>n</b> Sharing of paid employees .....	<b>1n</b>	X
<b>o</b> Reimbursement paid to other organization for expenses .....	<b>1o</b>	X
<b>p</b> Reimbursement paid by other organization for expenses .....	<b>1p</b>	X
<b>q</b> Other transfer of cash or property to other organization(s) .....	<b>1q</b>	X
<b>r</b> Other transfer of cash or property from other organization(s) .....	<b>1r</b>	X

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

## Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

[illegible]